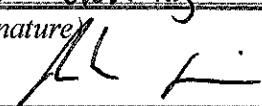


ATTACHMENT 3  
CONTRACTOR CERTIFICATION CLAUSES

CCC-307

CERTIFICATION

I, the official named below, CERTIFY UNDER PENALTY OF PERJURY that I am duly authorized to legally bind the prospective Contractor to the clause(s) listed below. This certification is made under the laws of the State of California.

Contractor/Bidder Firm Name (Printed)		Federal ID Number
Ms Window Cleaning		626 262642
By (Authorized Signature)		
		
Printed Name and Title of Person Signing		
Derek Rivera - owner		
Date Executed	Executed in the County of	
02/06/17	Riverside	

CONTRACTOR CERTIFICATION CLAUSES

1. STATEMENT OF COMPLIANCE: Contractor has, unless exempted, complied with the nondiscrimination program requirements. (Gov. Code §12990 (a-f) and CCR, Title 2, Section 8103) (Not applicable to public entities.)
2. DRUG-FREE WORKPLACE REQUIREMENTS: Contractor will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:
  - a. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.
  - b. Establish a Drug-Free Awareness Program to inform employees about:
    - 1) the dangers of drug abuse in the workplace;
    - 2) the person's or organization's policy of maintaining a drug-free workplace;
    - 3) any available counseling, rehabilitation and employee assistance programs; and,
    - 4) penalties that may be imposed upon employees for drug abuse violations.
  - c. Every employee who works on the proposed Agreement will:
    - 1) receive a copy of the company's drug-free workplace policy statement; and,
    - 2) agree to abide by the terms of the company's statement as a condition of employment on the Agreement.

Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and Contractor may be ineligible for award of any future State agreements if the department determines that any of the following has occurred: the Contractor has made false certification, or violated the certification by failing to carry out the requirements as noted above. (Gov. Code §8350 et seq.)

STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION  
**BID PROPOSAL**  
ADM-1412 (REV. 11/2015)

**ATTACHMENT 1**

CONTRACTOR'S NAME (Please Print):

*M1 Window Cleaning*

CONTRACT NUMBER

**SECTION A** Note to Bidder: Use the information provided below for bid calculations.

Contractor **MUST** pay their employees at least the minimum blended rates (as described herein) for Wages and Benefits. If Contractor is going to use employee(s) with a job title other than what is listed, please refer to the CalHR website to obtain the blended rates.  
**The Department has elected to use the Blended Benefit Rates.** If actual benefits are already being provided, Contractor is required to provide proof of each type of benefit, with the dollar value, at time of award. Wages and Benefits must meet the GC 19134 requirements as posted on the CalHR web-site: <http://www.calhr.ca.gov/state-hr-professionals/Pages/current-rates-on-or-after-20030701.aspx>.

A	B	C	D
Employee Job Title	Blended Hourly *Salary Rates	Blended **Benefits Rates	Employee Total Rates Hourly Rates (B) + Blended Benefit Rates (C)
Window Cleaner	14.17	10.43	24.60

**SECTION B** Note to Bidder: Use the calculations from Section A, as appropriate, to complete Section B.

G ITEM NO.	H UNIT OF MEASURE	I DESCRIPTION OF SERVICES	J UNIT PRICE	K ESTIMATED QUANTITY	L SUB-TOTAL (Unit Price x Quantity)
1	Bi-Annually	Cleaning Exterior of Building and Building Glass at Transportation Management Center at 7183 Opportunity Road, San Diego, CA 92111, as described in Exhibit A, Scope of Work (SOW)	\$ 6,500.00	4	\$ 26,000.00
2	Annually	Cleaning Interior Building Glass at Transportation Management Center at 7183 Opportunity Road, San Diego, CA 92111, as described in Exhibit A, SOW	\$ 2,500.00	2	\$ 5,000.00
3			\$		\$
4			\$		\$
5					

The Contractor shall perform all work under this Agreement for the sum of

\$ (Grand Total) **\$31,000.00**

- The above quantities are estimates only and are given as a basis for comparison of bids. No guarantee is made or implied as to the exact quantity that will be needed.
- IN CASE OF DISCREPANCY BETWEEN THE UNIT PRICE AND THE TOTAL SET FORTH FOR A UNIT BASIS ITEM, THE UNIT PRICE SHALL PREVAIL.

Per GC 19134, the rates are set at 85% of the State's salary and benefit cost for State employees.

\* "Salary" includes wages, retirement, Social Security, and Medicare

\*\* "Benefits" includes health, dental, vision, holidays, sick leave, and vacation.

## BIDDER DECLARATION

### 1. Prime bidder information (Review attached Bidder Declaration Instructions prior to completion of this form):

- a. Identify current California certification(s) (MB, SB, NVSA, DVBE): SB or None ☐ (If "None," go to Item #2)
- b. Will subcontractors be used for this contract? Yes ☒ No ☐ (If yes, indicate the distinct element of work your firm will perform in this contract e.g., list the proposed products produced by your firm, state if your firm owns the transportation vehicles that will deliver the products to the State, identify which solicited services your firm will perform, etc.). Use additional sheets, as necessary.

- c. If you are a California certified DVBE: (1) Are you a broker or agent? Yes ☐ No ☐  
 (2) If the contract includes equipment rental, does your company own at least 51% of the equipment provided in this contract (quantity and value)? Yes ☐ No ☐ N/A ☐

### 2. If no subcontractors will be used, skip to certification below. Otherwise, list all subcontractors for this contract. (Attach additional pages if necessary):

Subcontractor Name, Contact Person, Phone Number & Fax Number	Subcontractor Address & Email Address	CA Certification (MB, SB, NVSA, DVBE or None)	Work performed or goods provided for this contract	Corresponding % of bid price	Good Standing?	51% Rental?
TSK Enterprise LLC Terry King 619-846-6180 858-771-1739	15521 Canton Ridge Terrace San Diego, CA 92127 TSKenterprise@gmail.com	SB + DVBE #7001991	Interior window cleaning	33%	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

**CERTIFICATION:** By signing the bid response, I certify under penalty of perjury that the information provided is true and correct.

ATTACHMENT 4  
BID/BIDDER CERTIFICATION SHEET

Only an individual who is authorized to bind the bidding firm contractually shall sign the Bid/Bidder Certification Sheet. The signature must indicate the title or position that the individual holds in the firm. This Bid/Bidder Certification Sheet must be signed and returned along with all "required attachments" as an entire package with original signatures. The bid must be transmitted in a sealed envelope in accordance with IFB instructions.

- A. Our all-inclusive bid is submitted in a sealed envelope marked "Bid Submittal - Do Not Open".
- B. All required attachments are included with this certification sheet.
- C. I have read and understand the DVBE participation requirements and have included documentation demonstrating that I have met the participation goals.
- D. The signature affixed hereon and dated certifies compliance with all the requirements of this bid document. The signature below authorizes the verification of this certification.
- E. The signature and date affixed hereon certifies that this bid is a firm offer for a 90-day period.

An Unsigned Bid/Bidder Certification Sheet May Be Cause for Bid Rejection

1. Company Name <u>Mr Winlow Fleming</u>	2. Telephone Number <u>( ) 811-679-4636</u>	2a. Fax Number <u>( ) 951-471-2190</u>
2b. Email Address <u>rwfleming@outlook.com</u>		
3. Address <u>500 W. Graham Ave, #515, Lake Elsinore, CA 92531-0515</u>		
Indicate your organization type:		
4. <input checked="" type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input type="checkbox"/> Corporation
Indicate the applicable employee and/or corporation number:		
7. Federal Employee ID No. (FEIN) <u>626262642</u>	8. California Corporation No. <u>N/A</u>	
Indicate the Department of Industrial Relations information:		
9. Contractor Registration Number <u>1000028019</u>		
Indicate applicable license and/or certification information:		
10. Contractor's State Licensing Board Number <u>N/A</u>	11. PUC License Number CAL-T- <u>N/A</u>	
12. Bidder's Name (Print) <u>Deigh Rivers</u>	13. Title <u>owner</u>	
14. Signature <u>[Signature]</u>	15. Date <u>02/06/17</u>	
16. Are you certified with the Department of General Services, Office of Small Business and Disabled Veteran Business Enterprise Services (OSDS) as:		
a. Small Business Enterprise Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, enter certification number: <u>2002198</u>		
b. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, enter your service code below: _____		
<b>NOTE:</b> A copy of your Certification is required to be included if either of the above items is checked "Yes".		
Date application was submitted to OSDS, if an application is pending: _____		
17. Are you a Non-Small Business committing to the use of 25% Certified Small Business Subcontractor Participation? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If Yes, complete and return the Bidder Declaration form, GSPD-05-105 with your bid.		



**JLK Enterprise Inc**  
**3639 Midway Dr. Ste B195**  
**San Diego, CA. 92110**

## SubContractor Quote

### I. OVERVIEW

JLK Enterprise, Inc is a certified Small Business (SB), & Disables Veteran Business Enterprise (DVBE) with Headquarters in San Diego, CA. It's owner is a military veteran of 30 of years of service who is committed to providing professional and first class cleaning services at a competitive price.

### II. SCHEDULE OF SERVICE

Annually - Two cleaning technicians 7am to 4pm: **(Tuesday – Saturday)**

### III. PRICING

The following table details the pricing for delivery of the services outlined in this proposal.

#### JLK Enterprise Billing Summary

2/6/2017

LABOR Category	Rate	Hours	Monthly Hrs	OT Hrs	OT Cost	Straight Cost	Straight + OT
Staff/Supervisor	\$26.50	25.0	NA	0	\$0	\$ 662.50	\$ 662.50
staff	\$24.60	25.00	NA	0	\$0	\$ 615.00	\$ 615.00
<b>Direct Labor Cost (DLC) Subtotal</b>			-	0			<b>\$ 1,277.50</b>
Overhead Costs (OVHD)						25%	\$ 319.38
<b>Burdened LABOR (with Fringe &amp; Overhead)</b>							<b>\$ 1,596.88</b>
Materials							225.00
FEE/Profit						30%	\$ 383.25
<b>Base Year Cost</b>							<b>\$ 2,205.13</b>
<b>TOTAL COST</b>							<b>\$ 2,205.13</b>

### IV. INSURANCE

JLK Enterprise, Inc shall provide valid certificate of insurance of all applicable insurance policies including Workers' Compensation insurance, General Liability, automobile liability insurance all company vehicles and such other insurance as required by Owner.

### V. Conclusion

If you have questions on this quote, feel free to contact Jerry King at your convenience by email at [jlkenterprise@gmail.com](mailto:jlkenterprise@gmail.com), 3639 Midway Dr. Ste B195 San Diego, CA. 92110 or by phone at 619 846 6180.